3235-0076

FORM D

PROCESSED

APR 2 4 2008

THOMSON REUTERS

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY
Profix Serial
DATE RECEIVED

OMB Number:

Expires:

CIN

OMB APPROVAL

Estimated average burden

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Iron Creek Capital Corp SEC Mail Processing Rute 504 Rule 505 Rule 506 Section 4(6) ULOE Filing Under (Check box(es) that apply): Section Type of Filing: A. BASIC IDENTIFICATION DATA -16 2008 Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Washington, DC Iron Creek Capital Corp. Telephone Number (Including Area Code) Address of Executive Offices (Number and Street, City, State, Zip Code) Suite 1028, Bentall 5, 550 Burrard Street, Box 61, Vancouver, BC V6C 2B5 604-689-1428 (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) Address of Principal Business Operations (if different from Executive Offices) **Brief Description of Business Exploration and Development** Type of Business Organization other (please s limited partnership, already formed corporation business trust limited partnership, to be formed Year Month Actual Estimated 06 Actual or Estimated Date of Incorporation or Organization: $\mathbf{0}$ Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

GENERAL INSTRUCTIONS

Federal;

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or best typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filled with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filling of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

建筑的 数二级工业 非 医红髓球囊 眼中	DICATION DATE	2.71	
2. Enter the information requested for the following:			
 Each promoter of the issuer, if the issuer has been organized within 			
 Each beneficial owner having the power to vote or dispose, or direct to 			
 Each executive officer and director of corporate issuers and of corp 	orate general and mana	ging partners of p	artnership issuers; and
 Each general and managing partner of partnership issuers. 			
Check Box(cs) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Winn, Michael			
Business or Residence Address (Number and Street, City, State, Zip Code)			
Suite 1028, Bentail 5, 550 Burrard Street, Box 61, Vancouver, BC	V6C 2B5		
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)	<u> </u>	<u> </u>	
Messier, Cheryl			
Business or Residence Address (Number and Street, City, State, Zip Code)			
Suite 1028, Bentall 5, 550 Burrard Street, Box 61, Vancouver, BC	V6C 2B5		
Check Box(cs) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Whittall, Sally			
Business or Residence Address (Number and Street, City, State, Zip Code)			
Suite 1028, Bentall 5, 550 Burrard Street, Box 61, Vancouver, BC	V6C 2B5		
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Graham, Richard A.		. =	
Business or Residence Address (Number and Street, City, State, Zip Code)			
Suite 1028, Bentall 5, 550 Burrard Street, Box 61, Vancouver, BC	: V6C 2B5		
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Burchill, Donn			
Business or Residence Address (Number and Street, City, State, Zip Code)		***************************************	
Suite 1028, Bentall 5, 550 Burrard Street, Box 61, Vancouver, BC	V6C 2B5		
Check Box(es) that Apply: Promoter Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first, if individual) Osler, Tim			
Business or Residence Address (Number and Street, City, State, Zip Code)	· · · · · · · · · · · · · · · · · · ·		
Suite 1028, Bentall 5, 550 Burrard Street, Box 61, Vancouver, BC			
Check Box(es) that Apply: Promoter Deneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Tombstone Aruba A.V.V.			
Business or Residence Address (Number and Street, City, State, Zip Code)			
P.O. Box 5055, Oranjestad, Aruba			

	養傷養		1	1	鄉蘭	V (TRAINTI	oxive ov	T OPPERL	CH.	14 6			
1.	Une the	icenes sold	, or does th	na laguar ir	stand to sai	ll to non-er	ccedited in	nvestars in	this offeri	na?		Yes	No ⊠
•.	una mic	133061 3010	, 01 6003 11			Appendix.						L	
2.	What is	the minim	um investm			• •		_				s N/A	
٤	***************************************	410 111111111			00 0000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,					Yes	No
3.	Does the	offering	permit joint	t ownershi	p of a sing	le unit?		.,		**********			
4.	Enter th	e informat	ion request	ed for each	h person w	ho has bee	n or will b	e paid or ;	given, dire	etly or indi	rectly, any	1	
	Commiss If a perso	iion or simi on to be list	ilar remune: ted is an ass	ration for s sociated po	Olicitation rson or age	of purchase int of a brok	er or deale.	ction with rregistered	sales of sec I with the S	entities in ti EC and/or	ne offering with a state	, 8	
	or states	, list the na	me of the b	roker or de	aler. If mo	re than five	(5) person	is to be list	ed are asso	ciated pers	ons of sucl	1	
B. 4			you may se		informati	on for that	Droker of	Jealer only	<u>. </u>				
N/		ASI DAME I	first, if indi	ividuai)									
Bus	iness or l	Residence	Address (N	lumber and	Street, Ci	ty, State, Z	ip Code)						
Nai	ne of Ass	ociated Br	oker or De	aler									
						- 0 U :- I							
Sia			Listed Has " or check									[] A1	States
	(Cneck	All States	Oreneck	1001410081	States)		****************		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	••••••		□ ~	Jules
	AL	[AK]	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID)
	(CAR)	[M]	IA NOTE:	KS	KĀ)	(LA) (NM)	(ME)	MD) NC)	MA ND	MI) OH)	MN) OK)	MS) (OR)	MO PA
	MT RT	NE)	(NV)	(<u>MH</u>)	נען דא	(UT)	<u>[VY]</u>	[VA]	WA	WV)	(WI)	WY	PR]
				ربني									
Ful) Name (I	.ast namc	first, if indi	ividua!)									
Bu	siness or	Residence	Address ()	Number an	d Street, C	ity, State, 2	Zip Code)			-		. •	
Ne	me of Ass	ociated Br	oker or De	aler							<u></u>		
Sta	tes in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit I	Purchasers						
	(Check	"All States	" or check	individual	States)	**************	***************	*************				A1	States
	AL	AK	AZ	AR	(ÇA)	CO	(CT)	DE	DC	FL	GA]	HI	ID
	IL	[N]	[]A]	(KS)	KY	LA	(ME)	MD	MA	MI	MN	MS	MO
	MT	NE)	(<u>Aŭ</u>	(<u>NH</u>)	(נא) [XX]	[אא] [דֹנוֹ	<u>(₹₹)</u> [₹₹]	NC VA	ND)	OH WV	OK WI	OR WY	PA PR
	RI	(SC)	SD)	(TN)	لمن	רדאו	(<u>A1)</u>			(111)		سب	
Ful	l Name (I	.ast pame	first, if ind	ividual)									
Bu	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Na	me of Ass	ociated Br	oker or De	alcr						· · · · · · · · · · · · · · · · · · ·			
Sta	tes in Wh	ich Person	Listed Ha	s Solicited	or Intends	to Solicit I	Purchasers						
			or check						**************	***************************************	**********	☐ All	States
	ΑŪ	(AK)	AZ	[AR]	CA	(CO)	CT	DE	(DC)	FL	GA	HI	מו
		N	IA	KS	ΚŸ	(LA)	ME	MD	MA	MU	MN	MS	MO
	MT	NE	NV	(HZ	N	NM	YM	(NC)	מא	OH)	OK)	OR.	[PA]
	RI	SC	(SD)	[TN]	TX	UT	VT	VA	WA	WV	Wι	WY	PR

} .	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Angreneta	Amount Aiready
	Type of Security	Aggregate Offering Price	Sold
	Debt		\$
	Equity 2,185,000 Units*	1,650,965.24	s 571,902.99
	[7] Common Preferred		
	Convertible Securities (including warrants)	3	\$
	Pertnership Interests	<u> </u>	\$
	Other (Specify)		
	Total	1,650,965.24	\$ 571,902.99
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	8	s 1,650,965.24
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix. Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	•	\$
	Regulation A		
	•		5
	Rule 504		\$ \$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		3_0.00
	Transfer Agent's Fees		s
	Printing and Engraving Costs		\$
	Legal Fees	2	s 5,000.00
	Accounting Fees	_	\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	_	5
	Other Expenses (identify) Blue sky filing fees	_	\$ 1,800.00
	Total		s 6,800.00

^{*} Each unit consists of one common share and one common share purchase warrant. Each common share purchase warrant entitles the holder thereof to purchase one common share until April 4, 2010 at an exercise price of \$0.49385 per warrant.

	and total expenses furnished in response to Part C proceeds to the issuer."	offering price given in response to Part C — Question C — Question 4.a. This difference is the "adjusted ground and adjusted ground and adj	55 		<u>\$ 1,644,165.24</u>
5.	each of the purposes shown. If the amount fo	s proceed to the issuer used or proposed to be used for or any purpose is not known, furnish an estimate an all of the payments listed must equal the adjusted grow Part C — Question 4.b above.	ıd		
				Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	(1)		s	
	Purchase of real estate		🔲	s	. 🗆 5
	Purchase, rental or leasing and installation of		_		
		le les			
		I facilities	ل	3	. 🗆 3
	Acquisition of other businesses (including the offering that may be used in exchange for the				
	issuer pursuant to a merger)		🗀	\$. 🗆 \$
	Repayment of indebtedness	[]	\$. 🗆 \$	
	Working capital	- 🗖	\$	s	
	Other (specify): Work program for mining	interests	. 🗆	s	\$ 1,644,165.2
				\$. 🗆 \$
	Column Totals		П	\$	ZIS 1,644,165.24
					644,165.24
1	非验证是这个法证的集中的	FO FEDERAL SIGNATURE 5	和	湯湯質	為農功網
sig	nature constitutes an undertaking by the issuer to	y the undersigned duly authorized person. If this notion furnish to the U.S. Securities and Exchange Commercedited investor pursuant to paragraph (b)(2) of	nissi	on, upon writte	
İss	uer (Print or Type)	Signature	Da	ite	
In	on Creek Capital Corp.	$(\mathcal{S}_{\mathcal{A}})$ $\mathcal{A}_{\mathcal{A}}$	^	pri)// , 2008	
	me of Signer (Print or Type)	Title of Signer (Print or Type)			
		Director			

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		· 崇礼· 医杂心的数型或性
1.	Is any party described in 17 CFR 230	.262 presently subject to any of the disqualification Yes No
		See Appendix, Column 5, for state response.
2.	The undersigned issuer hereby underta D (17 CFR 239.500) at such times as	kes to furnish to any state administrator of any state in which this notice is filed a notice on Form required by state law.
3.	The undersigned issuer hereby undert issuer to offerees.	akes to furnish to the state administrators, upon written request, information furnished by the
4.	limited Offering Exemption (ULOE)	it the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform of the state in which this notice is filed and understands that the issuer claiming the availability stablishing that these conditions have been satisfied.
	uer has read this notification and knows the thorized person.	the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned
	(Print or Type) reek Capital Corp.	Signature Date April //, 2008
Name ((Print or Type)	Title (Print or Type)
Richar	rd A. Graham	Director

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

2 A							TO THE STATE	SI AKONI	K-11/1-LHEGE	
1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL		×		0	\$0.00	0	\$0.00		×	
ΑK		к		0	\$0.00	0	\$0.00		K	
ΑZ		×	100,000 units/ \$75.559.05	1	\$75,559.05	0	\$0.00		×	
AR		×		0	\$0.00	0	\$0.00		×	
CA		к	1,225,000 units/ \$925,598.36	5	\$925,598.36	0	\$0.00		×	
со		×		0	\$0.00	0	\$0.00		×	
СТ		×		0	\$0.00	0	\$0.00		×	
DE		×		0	\$0.00	0	\$0.00		×	
DC		×		0	\$0.00	0	\$0.00		ĸ	
FL		×	660,000 units/ \$498,689.73	1	\$498,689.73	0	\$0.00		к	
GA		×		0	\$0.00	0	\$0.00		K	
HI		×		o	\$0.00	0	\$0.00		*	
ID		×		0	\$0.00	0	\$0.00		×	
ΙL		к		0	\$0.00	0	\$0.00		×	
IN		×		0	\$0.00	0	\$0.00		×	
IA		×		0	\$0.00	0	\$0.00		×	
KS		ĸ		0	\$0.00	0	\$0.00		×	
KY		×		0	\$0.00	0	\$0.00		×	
LA		×		0	\$0.00	0	\$0.00		x	
ME		×		0	\$0.00	0	\$0.00		JΚ	
MD		×		0	\$0,00	0	\$0.00		ж	
MA		ж		0	\$0.00	0	\$0.00		×	
MI		ж		0	\$0.00	0	\$0.00		K	
MN		×		0	\$0.00	0	\$0.00		×	
MS		×		0	\$0.00	0	\$0.00		ĸ	

					NURSO L				
_	Intend to sell to non-accredited investors in State (Part B-Item 1)		Intend to sell and aggregate to non-accredited investors in State Type of security and aggregate offering price offered in state		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО		×		0	\$0.00	0	\$0.00		×
MT		ж		0	\$0.00	0	\$0.00		×
NE		×		0	\$0.00	0	\$0.00		×
NV		×		0	\$0.00	0	\$0.00		×
ΝН	-	×		0	\$0.00	0	\$0.00		×
נא		×		0	\$0.00	0	\$0.00		ж
NM		×		0	\$0.00	0	\$0.00		K
NY		×		0	50.00	0	\$0.00		×
NC		×		0	\$0.00	0	\$0.00		×
ND		×		0	\$0.00	0	\$0.00		×
он		×		0	\$0.00	0	\$0.00		×
ОК		×		0	\$0.00	0	\$0.00		×
OR		×		0	\$0.00	a	\$0.00		×
PA		×		0	\$0.00	0	\$0.00		×
RI		x		0	\$0.00	0	\$0.00		×
sc		×		0	\$0.00	0	\$0.00		×
SD		×		0	\$0.00	0	\$0.00		×
TN		×		0	\$0.00	0	\$0.00		ĸ
тх		×		0	\$0.00	0	\$0.00		×
UΤ		×		0	\$0.00	0	\$0.00		ĸ
VT		×	200,000 units/ \$151,118.10	1	\$151,118.10	0	\$0.00		×
VA		×		0	\$0.00	0	\$0.00		×
WA		×]	0	\$0.00	0	\$0.00		×
w۷		×		0	\$0.00	0	\$0.00		×
WI		×		0	\$0.00	0	\$0.00		×

1	to non-e	to sell accredited as in State 1-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		5 Disqualification under State ULO (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY		к		0	50.00	0	\$0.00		×
PR		к		0	\$0.00	0	\$0.00		K

END